R-1021 (10/00)



State of Louisiana
Department of Revenue
Sales Tax Division
P.O. Box 3138
Baton Rouge, LA 70821-3138

Sales Tax Electronic Filing Payment Voucher

Important notice

The coupon below must be used as a remittance advice by those sales tax filers who have submitted their sales tax returns through on-line electronic filing, and who are not required or who have not elected to submit their remittances through electronic funds transfer. In order to avoid the assessment of penalties and interest, remittance of the full amount due on the electronically filed return must be submitted to the Department on or before the 20th day of the month following the close of the calendar month covered by the return. Please assure that your sales tax account number and the filing period are correctly shown in the spaces provided on the coupon. Please complete and retain the top portion of this form as a record of your payment.

Do not send cash.

Complete and retain this portion as a record of payment.

Sales Tax Electronic Filing Payment Voucher

Account number____

| Address | | _ Filing period (Month/Year) | |
|-----------------------------------------------|-----------------------------------------------------------------------|------------------------------------------------------------------|------------------------|
| | | | |
| | | Amount of payment | |
| | | Check number | |
| | | Date sent | |
| | | | |
| | | | |
| Detach and submit | the voucher below with your payme | ent by the 20 th of the month following t | he month of the return |
| Detach and submit | | ent by the 20th of the month following t | he month of the return |
| R-1021 (10/00) | Sales Tax Electronic F | Filing Payment Voucher | he month of the return |
| R-1021 (10/00) Name | Sales Tax Electronic F | Filing Payment Voucher | S |
| R-1021 (10/00) NameAddress | Sales Tax Electronic F | Filing Payment Voucher Account number | S |
| R-1021 (10/00) NameAddress | Sales Tax Electronic F | Filing Payment Voucher Account number | S |
| R-1021 (10/00) Name Address City, State, ZIP | Sales Tax Electronic F | Account number Filing period (month/year) AMOUNT ENCLOSED | S |
| R-1021 (10/00) Name Address City, State, ZIP | Sales Tax Electronic F Make payment to: Louisiana Department of Reve | Account number Filing period (month/year) AMOUNT ENCLOSED Enue | S |

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